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09/349473
JCS111 U.S. PTO

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

| | |
|--|---------------|
| Attorney Docket No. | 1272.7910 DII |
| First Named Inventor or Application Identifier | |
| Noribumi KOITABASHI | |
| Express Mail Label No. | |

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

| | | | |
|--|---|--------------|-----|
| <input checked="" type="checkbox"/> | Fee Transmittal Form (Submit an original, and a duplicate for fee processing) | | |
| 2. <input checked="" type="checkbox"/> | Specification | Total Pages | 118 |
| 3. <input checked="" type="checkbox"/> | Drawing(s) (35 USC 113) | Total Sheets | 81 |
| 4. <input checked="" type="checkbox"/> | Oath or Declaration | Total Pages | 6 |
| a. <input type="checkbox"/> | Newly executed (original or copy) | | |
| b. <input type="checkbox"/> | Unexecuted for information purposes | | |
| c. <input checked="" type="checkbox"/> | Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below] | | |
| i. <input type="checkbox"/> | DELETION OF INVENTOR(S) Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). | | |
| <input checked="" type="checkbox"/> | Incorporation By Reference (useable if Box 4c is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4c, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. | | |

| | |
|-----------------------------|--|
| 6. <input type="checkbox"/> | Microfiche Computer Program (Appendix) |
| 7. <input type="checkbox"/> | Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) |
| a. <input type="checkbox"/> | Computer Readable Copy |
| b. <input type="checkbox"/> | Paper Copy (identical to computer copy) |
| c. <input type="checkbox"/> | Statement verifying identity of above copies |

ACCOMPANYING APPLICATION PARTS

| | | |
|---|--|--|
| 8. <input type="checkbox"/> | Assignment Papers (cover sheet & document(s)) | |
| 9. <input type="checkbox"/> | 37 CFR 3.73(b) Statement (when there is an assignee) | <input type="checkbox"/> Power of Attorney |
| 10. <input type="checkbox"/> | English Translation Document (if applicable) | |
| 11. <input checked="" type="checkbox"/> | Information Disclosure Statement (IDS)/PTO-1449 | <input type="checkbox"/> Copies of IDS Citations |
| 12. <input checked="" type="checkbox"/> | Preliminary Amendment | |
| 13. <input checked="" type="checkbox"/> | Return Receipt Postcard (MPEP 503) (Should be specifically itemized) | |
| 14. <input type="checkbox"/> | Small Entity Statement(s) | <input type="checkbox"/> Statement filed in prior application Status still proper and desired |
| 15. <input type="checkbox"/> | Certified Copy of Priority Document(s) (if foreign priority is claimed) | |
| 16. <input checked="" type="checkbox"/> | Other: Claim to Priority, Request for Approval to Amend the Drawings | |

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

| | | | |
|---------------------------------------|--|---|-------------------------------------|
| <input type="checkbox"/> Continuation | <input checked="" type="checkbox"/> Divisional | <input type="checkbox"/> Continuation-in-part (CIP) | of prior application No. 08/579,241 |
|---------------------------------------|--|---|-------------------------------------|

18. CORRESPONDENCE ADDRESS

| | | |
|---|--|--|
| <input checked="" type="checkbox"/> Customer Number or Bar Code Label | 05514 (Insert Customer No. or Attach bar code label here) | or <input type="checkbox"/> Correspondence address below |
|---|--|--|

| | | | | | |
|---------|--|-----------|--|----------|--|
| NAME | | | | | |
| Address | | | | | |
| City | | State | | Zip Code | |
| Country | | Telephone | | Fax | |



| CLAIMS | (1) FOR | (2) NUMBER FILED | (3) NUMBER EXTRA | (4) RATE | (5) CALCULATIONS |
|--------|--|------------------|------------------|-------------------------------|------------------|
| | TOTAL CLAIMS (37 CFR 1.16(c)) | 5-20 = | 0 | X \$ 18.00 = | \$ 0.00 |
| | INDEPENDENT CLAIMS (37 cfr 1.16(b)) | 3-3 = | 0 | X \$ 78.00 = | \$ 0.00 |
| | MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d)) | | | \$260.00 = | \$ 0.00 |
| | | | | BASIC FEE (37 CFR 1.16(a)) | \$ 760.00 |
| | Total of above Calculations = | | | | \$ 760.00 |
| | Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28). | | | | |
| | TOTAL = | | | | \$ 760.00 |

19. Small entity status

- a. ☐ A Small entity statement is enclosed
- b. ☐ A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.
- c. ☐ Is no longer claimed.

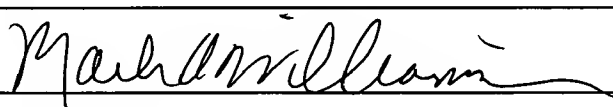
20. ☒ A check in the amount of \$ 760.00 to cover the filing fee is enclosed.

21. ☐ A check in the amount of \$ _____ to cover the recordal fee is enclosed.

22. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 06-1205:

- a. ☒ Fees required under 37 CFR 1.16.
- b. ☐ Fees required under 37 CFR 1.17.
- c. ☐ Fees required under 37 CFR 1.18.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

| | |
|-----------|--|
| NAME | Mark A. Williamson - Reg. No. 33,628 |
| SIGNATURE |  |
| DATE | July 9, 1999 |